

SEPTEMBER 2013 • PHYSICIANS

# Prostate Cancer

## September is prostate cancer awareness month...

So it's a good time to think about prostate cancer. Let's review what we know about it. Prostate cancer is the most common cancer in men. It is the second most common cause of cancer-related death in men.<sup>1</sup> According to the American Cancer Society,<sup>1</sup>

- About 238,600 men will be diagnosed with it in 2013.
- About 29,700 will die from it in 2013.
- 1 of every 6 men will have it.
- More than 90% of men live 10 to 15 more years when it is diagnosed early (local or regional stage).
- Only 28% of men live 5 years when it is diagnosed late (distant stage).
- 93% of cases are diagnosed early.

## Risk factors

There are 3 risk factors:

- Age (≥50 years)
- Family history of prostate cancer
- African American race

Almost all (97%) prostate cancers occur in men 50 and older. More than half (60%) occur in men 65 and older.<sup>1</sup> In African American men, the rate of prostate cancer is 70% higher than that in whites.<sup>1</sup> African Americans are also more likely to die from prostate cancer.

A diet high in processed meat or dairy foods may also be a risk factor. Men who are overweight or obese have a greater risk for advanced prostate cancer.

## Making an informed decision

Look at these things when you and/or your patients are thinking about doing prostate cancer screening:

- Facts about prostate cancer and screening
- The patient's medical history and risk factors
- The patient's age and current health
- The patient's lifestyle
- The patient's feelings and preferences



## Symptoms

There are usually no symptoms in the early stage. As the cancer advances, men may have:

- Blood in the urine or semen
- Trouble starting to urinate
- Weak or interrupted flow of urine
- Trouble completely emptying the bladder
- Frequent need to urinate, especially at night
- Pain or burning when urinating
- Pain in the back, hips, or pelvis
- Pain when ejaculating

These symptoms are not specific to cancer. Some may be seen in men with benign prostatic hyperplasia (BPH) or other conditions.

## Screening recommendations

Two large studies looked at prostate cancer screening and had conflicting results. So recommendations vary as shown in the table.

Organization	Recommendation
ACS <sup>2</sup>	Offer screening to well-informed, average-risk men. They should be 50 years or older and expected to live 10 or more years. Drop the age to 40 to 45 years for men at higher risk.
AUA <sup>3</sup>	Participate in shared decision-making with men who are 55-69 years old. You should expect them to live 10-15 years or longer. Do the same with older or younger men who are at high risk.
NCCN <sup>4</sup>	Offer baseline PSA testing to well-informed men 40 years of age and older.
ACPM <sup>5</sup>	Do not offer screening. There isn't enough evidence to recommend it.
USPSTF <sup>6</sup>	Do not screen with PSA. The potential benefits are not greater than the expected harm.

ACS, American Cancer Society; AUA, American Urological Association; NCCN, National Comprehensive Cancer Network; ACPM, American College of Preventive Medicine; USPSTF, U.S. Preventive Services Task Force.

## Information for your patients

- Prostate cancer is very common.
- Most prostate cancers progress slowly and will not bother the patient.
- Some prostate cancers cause death.
- Screening increases the chance of early diagnosis and cure.
- Screening tests can be positive when there is no cancer.
- Follow-up biopsy can cause soreness, blood in the urine, bleeding from the rectum, or infection. These occur in no more than  $\frac{1}{3}$ <sup>rd</sup> of men.
- Side effects from treatment can be mild or serious. They include:
  - Difficulty in getting an erection or keeping one long enough for sexual activity
  - Decrease in, or loss of, bladder control
  - Bowel problems: diarrhea, urgency, frequent bowel movements, or pain
  - Small risk of death or serious complications
- Not all men with prostate cancer need treatment.
- It's hard to know which cancers need treatment and which do not.

## How the laboratory can help

Quest Diagnostics offers a full line of tests for screening, diagnosing, and managing patients with prostate cancer. This includes standard tests like biopsy, total PSA, and free PSA. It also includes a highly sensitive PSA test that can be used to detect PSA after surgery. Less common tests are available too.

Quest Diagnostics has a lot of information about PSA testing. It includes age-related reference ranges, cutoffs for PSA density and velocity, important sample collection considerations, the effect of various drugs on PSA test results, and more. To read this information, click here.

## References

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6. U.S. Preventive Services Task Force. Screening for prostate cancer: U.S. Preventive Services Task Force recommendation statement. <http://www.uspreventiveservicestaskforce.org/prostatecancerscreening/prostatefinalrs.htm>. May 2012. Accessed May 8, 2013.